

APR 07 2005

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April 7, 2005

To:

Mail Stop Amendment
Commissioner for Patents
Alexandria, VA 22313-1450

Telephone:**Fax Number:**

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From: Edward B. Weller
Reg No. 37,468
650-833-2436

Ed B. Weller

Client-Matter Number:

2102397-910800

Re: U.S. Patent Application No. 09/881,788

Pages: - 16 - (including this form)

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Message:

Transmitted via Fax on: April 7, 2005
Attorney Docket No. 2102397-910800
U.S. Patent Application No. 09/881,788
Filing Date: June 14, 2001
Title: SMART MEMORY CARD WALLET

Enclosed is:

1. Transmittal Form;
2. Response to Office Action of December 10, 2004;
3. Petition for Extension of Time; and
4. Fee Transmittal for FY 2005

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Rosa A. Caviedes

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EM7185208.1

PTO/SB/21 (09-04)

Approved for use through 07/31/2008. OMB 0651-0031

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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	09/881,788	
	Filing Date	June 14, 2001	
	First Named Inventor	Sohrab Kianian	
	Art Unit	3621	
	Examiner Name	Firmin Backer	
Total Number of Pages in This Submission	16	Attorney Docket Number	2102397-910800

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached - \$120 charged to Deposit Account 07-1896 <input checked="" type="checkbox"/> Amendment/Reply - 12 Pgs. <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.62 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input checked="" type="checkbox"/> Petition for Extension of Time <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	DLA Piper Rudnick Gray Cary US LLP		
Signature	<i>Edward B. Weller</i>		
Printed name	Edward B. Weller		
Date	April 7, 2005	Reg. No.	37,468

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Signature	<i>Rosa A. Caviedes</i>	
Typed or printed name	Rosa A. Caviedes	Date
		April 7, 2005

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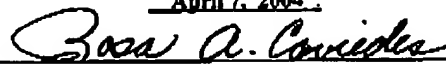
Application No. : 09/881,788
Applicant : Sohrab Kianian
Filed : June 14, 2001
TC/A.U. : 3621
Examiner : Firmin Backer
Title : SMART MEMORY CARD WALLET

Docket No. : 2102397-910800
Customer No. : 26379

M/S AMENDMENT
Commissioner for Patents
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Alexandria, VA 22313-1450

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Rosa A. Caviedes

RESPONSE TO OFFICE ACTION OF DECEMBER 10, 2004

Sir:

In response to the Office Action of December 10, 2004, please amend the above identified
application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this
paper.

Remarks/Arguments begin on page 8 of this paper.